

12-27-00

Box PATENT APPLICATION
ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Date: December 22, 2000

Docket No 9771110-07

12/22/00
JC6866 US
09/748068
12/27/00

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Joachim Wottrich

Mitchell Budniak

Ronald A. Coia

For: Multi-Test Circuit Breaker Locator

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Assistant Commissioner For Patents, Washington, D.C. 20231, on this date.

12/22/00

Paula M. Theismann

Date

Paula M. Theismann

Express Mail Label No. EL676986182US

Enclosed are:

16 pages of specification, 7 pages of claims and an abstract for filing a continuation in part patent application of USSN 09/061,434 filed April 17, 1998 and U.S. Serial No. _____ filed through the PCT on November 2, 1999 under Ser. No. PCT/US99/25775

an unexecuted oath or declaration, with power of attorney by inventors Joachim Wottrich and Ronald Coia.

an executed oath or declaration, with power of attorney by inventor Mitchell Budniak.

9 sheet(s) of informal drawing(s).

sheet(s) of formal drawings(s).

Assignment(s) of the invention to _____.

Assignment Form Cover Sheet.

A check in the amount of \$ _____ to cover the fee for recording the assignment(s) is enclosed.

Associate power of attorney.

Fee Calculation For Claims As Filed

| | | | | | |
|----------------------------|----|---|---------|------------------|-------------|
| a) Basic Fee | | | | | \$ 710.00 |
| b) Independent Claims | 3 | - | 3 = | X \$80.00 | = \$ |
| c) Total Claims | 41 | - | 20 = 21 | X \$18.00 | = \$ 378.00 |
| d) Fee for Multiple Claims | | | | X \$270.00 | = \$ |
| | | | | Total Filing Fee | \$ 1088.00 |

Applicant claims small entity status (37 CFR 1.27) reducing Filing Fee by half to 544.00

Check No. in the amount of \$.00 to cover the filing fee is enclosed

Charge \$ _____ to Deposit Account No. 19-3140.

Other _____

The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 19-3140. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-3140. Two duplicate copies of this sheet are enclosed.

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